

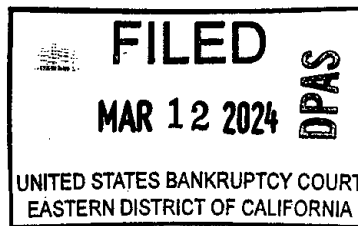
45

Fill in this information to identify the case:

United States Bankruptcy Court for the:

District of \_\_\_\_\_  
(State)

Case number (if known): \_\_\_\_\_ Chapter \_\_\_\_\_



☐ Check if this is an amended filing

9:20

0.00

2420960

Official Form 201

**Voluntary Petition for Non-Individuals Filing for Bankruptcy**

04/22

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Good Ground Investments LLC

2. All other names debtor used in the last 8 years  
Include any assumed names, trade names, and doing business as names

3. Debtor's federal Employer Identification Number (EIN) 87-2876434

4. Debtor's address

<b>Principal place of business</b>		<b>Mailing address, if different from principal place of business</b>
<u>9194 Bungalow Way</u>		
Number	Street	Number Street
		P.O. Box
<u>Elk Grove</u>	<u>CA</u>	<u>95758</u>
City	State	ZIP Code
<u>Sacramento</u>		<b>Location of principal assets, if different from principal place of business</b>
County		Number Street
		City State ZIP Code

5. Debtor's website (URL) \_\_\_\_\_

Debtor Good Ground Investments LLC Case number (if known) \_\_\_\_\_  
 Name \_\_\_\_\_

**6. Type of debtor**

- ☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))  
☐ Partnership (excluding LLP)  
☐ Other. Specify: \_\_\_\_\_

**7. Describe debtor's business****A. Check one:**

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))  
☒ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))  
☐ Railroad (as defined in 11 U.S.C. § 101(44))  
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))  
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))  
☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))  
☐ None of the above

**B. Check all that apply:**

- ☐ Tax-exempt entity (as described in 26 U.S.C. § 501)  
☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)  
☐ Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))

**C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.**

**8. Under which chapter of the Bankruptcy Code is the debtor filing?****Check one:**

- ☒ Chapter 7  
☐ Chapter 9  
☐ Chapter 11. **Check all that apply:**

- ☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$3,024,725 (amount subject to adjustment on 4/01/25 and every 3 years after that).  
☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).  
☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and it chooses to proceed under Subchapter V of Chapter 11.  
☐ A plan is being filed with this petition.  
☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).  
☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.  
☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12

**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?**

☒ No

☐ Yes.

District \_\_\_\_\_

When \_\_\_\_\_

Case number \_\_\_\_\_

MM / DD / YYYY

If more than 2 cases, attach a separate list.

District \_\_\_\_\_

When \_\_\_\_\_

Case number \_\_\_\_\_

MM / DD / YYYY

Debtor Good Ground Investments LLC

Case number (if known) \_\_\_\_\_

Name

**10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?**☒ No☐ Yes.

Debtor \_\_\_\_\_

Relationship \_\_\_\_\_

District \_\_\_\_\_

When \_\_\_\_\_

MM / DD / YYYY

List all cases. If more than 1, attach a separate list.

Case number, if known \_\_\_\_\_

**11. Why is the case filed in this district?**

Check all that apply:

☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.**12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?**☒ No☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.**Why does the property need immediate attention?** (Check all that apply.)☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard? \_\_\_\_\_

☐ It needs to be physically secured or protected from the weather.☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).☐ Other \_\_\_\_\_**Where is the property?**

Number \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_

State ZIP Code \_\_\_\_\_

**Is the property insured?**☐ No☐ Yes. Insurance agency \_\_\_\_\_

Contact name \_\_\_\_\_

Phone \_\_\_\_\_

**Statistical and administrative information****13. Debtor's estimation of available funds**

Check one:

☐ Funds will be available for distribution to unsecured creditors.☒ After any administrative expenses are paid, no funds will be available for distribution to unsecured creditors.**14. Estimated number of creditors**☒ 1-49☐ 50-99☐ 100-199☐ 200-999☐ 1,000-5,000☐ 5,001-10,000☐ 10,001-25,000☐ 25,001-50,000☐ 50,001-100,000☐ More than 100,000

Debtor Good Ground Investments LLC

Case number (if known) \_\_\_\_\_

Name

## 15. Estimated assets

- ☐ \$0-\$50,000  
☐ \$50,001-\$100,000  
☒ \$100,001-\$500,000  
☐ \$500,001-\$1 million

- ☐ \$1,000,001-\$10 million  
☐ \$10,000,001-\$50 million  
☐ \$50,000,001-\$100 million  
☐ \$100,000,001-\$500 million

- ☐ \$500,000,001-\$1 billion  
☐ \$1,000,000,001-\$10 billion  
☐ \$10,000,000,001-\$50 billion  
☐ More than \$50 billion

## 16. Estimated liabilities

- ☐ \$0-\$50,000  
☐ \$50,001-\$100,000  
☒ \$100,001-\$500,000  
☐ \$500,001-\$1 million

- ☐ \$1,000,001-\$10 million  
☐ \$10,000,001-\$50 million  
☐ \$50,000,001-\$100 million  
☐ \$100,000,001-\$500 million

- ☐ \$500,000,001-\$1 billion  
☐ \$1,000,000,001-\$10 billion  
☐ \$10,000,000,001-\$50 billion  
☐ More than \$50 billion

**Request for Relief, Declaration, and Signatures**

**WARNING --** Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## 17. Declaration and signature of authorized representative of debtor

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 11 / 29 / 2023  
MM / DD / YYYY

**X**

Signature of authorized representative of debtor

Printed name

Title

## 18. Signature of attorney

**X**

Signature of attorney for debtor

Date

MM / DD / YYYY

Printed name

Firm name

Number Street

City

State

ZIP Code

Contact phone

Email address

Bar number

State

Official Form 201A (12/15)

*[If debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11 of the Bankruptcy Code, this Exhibit "A" shall be completed and attached to the petition.]*

*[Caption as in Form 416B]*

### Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11

1. If any of the debtor's securities are registered under Section 12 of the Securities Exchange Act of 1934, the SEC file number is \_\_\_\_\_.

2. The following financial data is the latest available information and refers to the debtor's condition on \_\_\_\_\_.

a. Total assets \$ \_\_\_\_\_

b. Total debts (including debts listed in 2.c., below) \$ \_\_\_\_\_

c. Debt securities held by more than 500 holders

Approximate  
number of  
holders:

secured <input type="checkbox"/>	unsecured <input type="checkbox"/>	subordinated <input type="checkbox"/>	\$ _____	_____
secured <input type="checkbox"/>	unsecured <input type="checkbox"/>	subordinated <input type="checkbox"/>	\$ _____	_____
secured <input type="checkbox"/>	unsecured <input type="checkbox"/>	subordinated <input type="checkbox"/>	\$ _____	_____
secured <input type="checkbox"/>	unsecured <input type="checkbox"/>	subordinated <input type="checkbox"/>	\$ _____	_____
secured <input type="checkbox"/>	unsecured <input type="checkbox"/>	subordinated <input type="checkbox"/>	\$ _____	_____

d. Number of shares of preferred stock \_\_\_\_\_

e. Number of shares common stock \_\_\_\_\_

Comments, if any: \_\_\_\_\_

3. Brief description of debtor's business: \_\_\_\_\_

4. List the names of any person who directly or indirectly owns, controls, or holds, with power to vote, 5% or more of the voting securities of debtor: \_\_\_\_\_

Fill in this information to identify the case:

Debtor name \_\_\_\_\_

United States Bankruptcy Court for the: \_\_\_\_\_ District of \_\_\_\_\_  
(State)

Case number (if known): \_\_\_\_\_

☐ Check if this is an amended filing

# Official Form 204

## **Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders**

12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an *insider*, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

	Name of creditor and complete mailing address, including zip code	Name, telephone number, and email address of creditor contact	Nature of the claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of unsecured claim		
					Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
1							
2							
3							
4							
5							
6							
7							
8							

Debtor

Name \_\_\_\_\_

Case number (if known) \_\_\_\_\_

Name of creditor and complete mailing address, including zip code

Name, telephone number, and email address of creditor contact

**Nature of the claim**  
(for example, trade  
debts, bank loans,  
professional  
services, and  
government  
contracts)

Indicate if  
claim is  
contingent,  
unliquidated  
or disputed

Amount of unsecured claim

If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.

**Total claim, if partially secured**

**Deduction for value of collateral or setoff**

**Unsecured claim**

9

10

11

12

13

14

15

16

17

18

19

20

Fill in this information to identify the case:

Debtor name \_\_\_\_\_

United States Bankruptcy Court for the: \_\_\_\_\_ District of \_\_\_\_\_  
(State)

Case number (If known): \_\_\_\_\_

☐ Check if this is an amended filing

## Official Form 206Sum

**Summary of Assets and Liabilities for Non-Individuals**

12/15

**Part 1: Summary of Assets**1. **Schedule A/B: Assets—Real and Personal Property** (Official Form 206A/B)1a. **Real property:**Copy line 88 from *Schedule A/B* .....

\$ 375,000.00

1b. **Total personal property:**Copy line 91A from *Schedule A/B* .....

\$ 400.00

1c. **Total of all property:**Copy line 92 from *Schedule A/B* .....

\$ 375,400.00

**Part 2: Summary of Liabilities**2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D* .....

\$ 389,681.29

3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)3a. **Total claim amounts of priority unsecured claims:**Copy the total claims from Part 1 from line 6a of *Schedule E/F* .....

\$ 2429.80

3b. **Total amount of claims of nonpriority amount of unsecured claims:**Copy the total of the amount of claims from Part 2 from line 6b of *Schedule E/F* .....

+ \$ 700.00

4. **Total liabilities** .....

Lines 2 + 3a + 3b

\$ 392,811.09



Fill in this information to identify the case:

Debtor name \_\_\_\_\_

United States Bankruptcy Court for the: \_\_\_\_\_ District of \_\_\_\_\_  
(State)

Case number (if known): \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 206A/B

**Schedule A/B: Assets — Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1: Cash and cash equivalents**

1. Does the debtor have any cash or cash equivalents?

- ☒ No. Go to Part 2.  
☐ Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

2. Cash on hand

\$ 2,000.00

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	
3.1. _____	_____	_____	\$ _____
3.2. _____	_____	_____	\$ _____

4. Other cash equivalents (Identify all)

4.1. _____	\$ _____
4.2. _____	\$ _____

5. Total of Part 1

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$ \_\_\_\_\_

**Part 2: Deposits and prepayments**

6. Does the debtor have any deposits or prepayments?

- ☒ No. Go to Part 3.  
☐ Yes. Fill in the information below.

Current value of debtor's interest

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit	
7.1. _____	\$ _____
7.2. _____	\$ _____

Debtor

Name

Case number (if known)

**8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**

Description, including name of holder of prepayment

8.1. \_\_\_\_\_ \$ \_\_\_\_\_  
8.2. \_\_\_\_\_ \$ \_\_\_\_\_

**9. Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

\$ \_\_\_\_\_

**Part 3: Accounts receivable**

**10. Does the debtor have any accounts receivable?**

- ☒ No. Go to Part 4.  
☐ Yes. Fill in the information below.

Current value of debtor's interest

**11. Accounts receivable**

11a. 90 days old or less: \_\_\_\_\_ = ..... → \$ \_\_\_\_\_  
face amount doubtful or uncollectible accounts  
11b. Over 90 days old: \_\_\_\_\_ = ..... → \$ \_\_\_\_\_  
face amount doubtful or uncollectible accounts

**12. Total of Part 3**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$ \_\_\_\_\_

**Part 4: Investments**

**13. Does the debtor own any investments?**

- ☒ No. Go to Part 5.  
☐ Yes. Fill in the information below.

Valuation method used for current value

Current value of debtor's interest

**14. Mutual funds or publicly traded stocks not included in Part 1**

Name of fund or stock:

14.1. \_\_\_\_\_ \$ \_\_\_\_\_  
14.2. \_\_\_\_\_ \$ \_\_\_\_\_

**15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture**

Name of entity: \_\_\_\_\_ % of ownership: \_\_\_\_\_  
15.1. \_\_\_\_\_ % \$ \_\_\_\_\_  
15.2. \_\_\_\_\_ % \$ \_\_\_\_\_

**16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1**

Describe:

16.1. \_\_\_\_\_ \$ \_\_\_\_\_  
16.2. \_\_\_\_\_ \$ \_\_\_\_\_

**17. Total of Part 4**

Add lines 14 through 16. Copy the total to line 83.

\$ \_\_\_\_\_

Debtor

Good Ground Investments LLC

Name

Case number (if known)

**Part 5: Inventory, excluding agriculture assets**

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☒ No. Go to Part 6.
- ☐ Yes. Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19. Raw materials				
_____	MM / DD / YYYY	\$ _____	_____	\$ _____
20. Work in progress				
_____	MM / DD / YYYY	\$ _____	_____	\$ _____
21. Finished goods, including goods held for resale				
_____	MM / DD / YYYY	\$ _____	_____	\$ _____
22. Other inventory or supplies				
_____	MM / DD / YYYY	\$ _____	_____	\$ _____
23. Total of Part 5				\$ _____

Add lines 19 through 22. Copy the total to line 84.

24. Is any of the property listed in Part 5 perishable?

- ☐ No
- ☐ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

- ☐ No
- ☐ Yes. Book value \_\_\_\_\_ Valuation method \_\_\_\_\_ Current value \_\_\_\_\_

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- ☐ No
- ☐ Yes

**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.
- ☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
28. Crops—either planted or harvested			
_____	\$ _____	_____	\$ _____
29. Farm animals <i>Examples:</i> Livestock, poultry, farm-raised fish			
_____	\$ _____	_____	\$ _____
30. Farm machinery and equipment (Other than titled motor vehicles)			
_____	\$ _____	_____	\$ _____
31. Farm and fishing supplies, chemicals, and feed			
_____	\$ _____	_____	\$ _____
32. Other farming and fishing-related property not already listed in Part 6			
_____	\$ _____	_____	\$ _____

Name \_\_\_\_\_

Case number (if known)

\$ \_\_\_\_\_

**34. Is the debtor a member of an agricultural cooperative?**

☐ No

☐ Yes. Is any of the debtor's property stored at the cooperative?

☐ No☐ Yes

**35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?**

☐ No

☐ Yes. Book value \$ \_\_\_\_\_ Valuation method \_\_\_\_\_ Current value \$ \_\_\_\_\_

**36. Is a depreciation schedule available for any of the property listed in Part 6?**

☐ No☐ Yes

**37. Has any of the property listed in Part 6 been appraised by a professional within the last year?**

☐ No☐ Yes**Part 7: Office furniture, fixtures, and equipment; and collectibles**

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

☐ No. Go to Part 8.

☒ Yes. Fill in the information below.

### General description

**Net book value of debtor's interest**  
(Where available)

Valuation method  
used for current value

**Current value of debtor's interest**

### 39. Office furniture

\$ \_\_\_\_\_ \$ \_\_\_\_\_

#### 40. Office fixtures

\$ \_\_\_\_\_ \$ \_\_\_\_\_

**41. Office equipment, including all computer equipment and communication systems equipment and software**

COMPUTER, PRINTER

\$ 500.00

Depreciated Value

\$ 400.00

42. **Collectibles** *Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

42.1 \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

42.2 \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

42.3 \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

**43. Total of Part 7.**

§	400.00
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Add lines 39 through 42. Copy the total to line 86.

**44. Is a depreciation schedule available for any of the property listed in Part 7?**

☒ No☐ Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

☒ No☐ Yes

Debtor GOOD GROUND INVESTMENTS LLC  
Name

Case number (if known) \_\_\_\_\_

**Part 8: Machinery, equipment, and vehicles**

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☒ No. Go to Part 9.  
☐ Yes. Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
--	--	---	------------------------------------

47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles

47.1 _____	\$ _____	_____	\$ _____
47.2 _____	\$ _____	_____	\$ _____
47.3 _____	\$ _____	_____	\$ _____
47.4 _____	\$ _____	_____	\$ _____

48. Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels

48.1 _____	\$ _____	_____	\$ _____
48.2 _____	\$ _____	_____	\$ _____

49. Aircraft and accessories

49.1 _____	\$ _____	_____	\$ _____
49.2 _____	\$ _____	_____	\$ _____

50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)

_____	\$ _____	_____	\$ _____
-------	----------	-------	----------

51. Total of Part 8.

Add lines 47 through 50. Copy the total to line 87.

\$ \_\_\_\_\_

52. Is a depreciation schedule available for any of the property listed in Part 8?

- ☐ No  
☐ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- ☐ No  
☐ Yes

Debtor GOOD GROUND INVESTMENTS LLC Case number (if known) \_\_\_\_\_  
Name

**Part 9: Real property**

54. Does the debtor own or lease any real property?

- ☐ No. Go to Part 10.  
☒ Yes. Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1 2671 Grove Avenue, Sacramento, CA	Owner	\$ _____	ARV	\$ 425,000
55.2 _____	_____	\$ _____	_____	\$ _____
55.3 _____	_____	\$ _____	_____	\$ _____
55.4 _____	_____	\$ _____	_____	\$ _____
55.5 _____	_____	\$ _____	_____	\$ _____
55.6 _____	_____	\$ _____	_____	\$ _____

56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$ 425,000

57. Is a depreciation schedule available for any of the property listed in Part 9?

- ☒ No  
☐ Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

- ☐ No  
☒ Yes

**Part 10: Intangibles and intellectual property**

59. Does the debtor have any interests in intangibles or intellectual property?

- ☒ No. Go to Part 11.  
☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets	\$ _____	_____	\$ _____
61. Internet domain names and websites	\$ _____	_____	\$ _____
62. Licenses, franchises, and royalties	\$ _____	_____	\$ _____
63. Customer lists, mailing lists, or other compilations	\$ _____	_____	\$ _____
64. Other intangibles, or intellectual property	\$ _____	_____	\$ _____
65. Goodwill	\$ _____	_____	\$ _____

66. Total of Part 10.

Add lines 60 through 65. Copy the total to line 89.

\$ \_\_\_\_\_

Debtor

Name

Case number (if known)

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

- ☐ No  
☐ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- ☐ No  
☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- ☐ No  
☐ Yes

**Part 11: All other assets**

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☒ No. Go to Part 12.  
☐ Yes. Fill in the information below.

Current value of  
debtor's interest

71. Notes receivable

Description (include name of obligor)

\_\_\_\_\_ = → \$ 0.00  
Total face amount      doubtful or uncollectible amount

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

Tax year \_\_\_\_\_ \$ 0.00  
Tax year \_\_\_\_\_ \$ \_\_\_\_\_  
Tax year \_\_\_\_\_ \$ \_\_\_\_\_

73. Interests in insurance policies or annuities

\$ 0.00

74. Causes of action against third parties (whether or not a lawsuit has been filed)

\$ 0.00

Nature of claim \_\_\_\_\_

Amount requested \$ \_\_\_\_\_

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

\$ 0.00

Nature of claim \_\_\_\_\_

Amount requested \$ \_\_\_\_\_

76. Trusts, equitable or future interests in property

\$ 0.00

77. Other property of any kind not already listed Examples: Season tickets, country club membership

\$ 0.00  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_

78. Total of Part 11.

Add lines 71 through 77. Copy the total to line 90.

\$ 0.00

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

- ☒ No  
☐ Yes

Debtor

GOOD GROUND INVESTMENTS LLC

Name

Case number (if known)

**Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1.</i>	\$ 0.00	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$ 0.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$ 0.00	
83. Investments. <i>Copy line 17, Part 4.</i>	\$ 0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$ 0.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$ 0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$ 0.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$ 0.00	
88. Real property. <i>Copy line 56, Part 9.</i>	→	\$ 425,000
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$ 0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ \$ 0.00	
91. Total. Add lines 80 through 90 for each column. .... 91a.	\$ 0.00	+ 91b. \$ 425,000
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92. ....		\$ 425,000



Fill in this information to identify the case:

Debtor name \_\_\_\_\_  
 United States Bankruptcy Court for the: \_\_\_\_\_ District of \_\_\_\_\_  
 (State)  
 Case number (if known): \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 206D

**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.  
☐ Yes. Fill in all of the information below.

**Part 1: List Creditors Who Have Secured Claims**

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

Column A  
Amount of claim  
Do not deduct the value of collateral.

Column B  
Value of collateral that supports this claim

<p><b>2.1</b> Creditor's name Kiavi</p> <p>Creditor's mailing address 2 Allegheny Center, Nova Tower 2 Pittsburgh, PA 15212</p> <p>Creditor's email address, if known _____</p> <p>Date debt was incurred _____                  Last 4 digits of account number _____</p> <p>Do multiple creditors have an interest in the same property?  <input type="checkbox"/> No  <input checked="" type="checkbox"/> Yes. Specify each creditor, including this creditor, and its relative priority.                  _____</p>	<p>Describe debtor's property that is subject to a lien 2671 Grove Avenue, Sacramento, CA</p> <p>Describe the lien _____</p> <p>Is the creditor an insider or related party?  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?  <input type="checkbox"/> No  <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).</p> <p>As of the petition filing date, the claim is:                  Check all that apply.  <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p>	<p>\$ 329,181.29</p> <p>\$ 329,181.29</p>
<p><b>2.2</b> Creditor's name Raythel Fisher, Jr.</p> <p>Creditor's mailing address 1205 E. Perrin Avenue, Apt. 203 Fresno, CA 93920</p> <p>Creditor's email address, if known _____</p> <p>Date debt was incurred on or about 12/1/2022                  Last 4 digits of account number _____</p> <p>Do multiple creditors have an interest in the same property?  <input type="checkbox"/> No  <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority?  <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.                  _____  <input checked="" type="checkbox"/> Yes. The relative priority of creditors is specified on lines 2.1</p>	<p>Describe debtor's property that is subject to a lien 2671 Grove Avenue, Sacramento, CA</p> <p>Describe the lien Deed of Trust</p> <p>Is the creditor an insider or related party?  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).</p> <p>As of the petition filing date, the claim is:                  Check all that apply.  <input type="checkbox"/> Contingent  <input checked="" type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p>	<p>\$ 37,500.00</p> <p>\$ 37,500.00</p>

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$ \_\_\_\_\_

Debtor

Name

**Part 1: Additional Page**

Column A

Amount of claim

Do not deduct the value of collateral.

Column B

Value of collateral that supports this claim

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

<p><b>2.</b> Creditor's name</p> <p>_____</p> <p>Creditor's mailing address</p> <p>_____</p> <p>_____</p> <p>Creditor's email address, if known</p> <p>_____</p> <p>Date debt was incurred _____</p> <p>Last 4 digits of account number _____</p> <p>Do multiple creditors have an interest in the same property?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Have you already specified the relative priority?</p> <p><input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.</p> <p>_____</p> <p>_____</p> <p><input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____</p>	<p>Describe debtor's property that is subject to a lien</p> <p>_____</p> <p>_____ \$ _____ \$ _____</p> <p>Describe the lien</p> <p>_____</p> <p>Is the creditor an insider or related party?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).</p> <p>As of the petition filing date, the claim is:</p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>
--	---

<p><b>2.</b> Creditor's name</p> <p>_____</p> <p>Creditor's mailing address</p> <p>_____</p> <p>_____</p> <p>Creditor's email address, if known</p> <p>_____</p> <p>Date debt was incurred _____</p> <p>Last 4 digits of account number _____</p> <p>Do multiple creditors have an interest in the same property?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Have you already specified the relative priority?</p> <p><input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.</p> <p>_____</p> <p>_____</p> <p><input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____</p>	<p>Describe debtor's property that is subject to a lien</p> <p>_____</p> <p>_____ \$ _____ \$ _____</p> <p>Describe the lien</p> <p>_____</p> <p>Is the creditor an insider or related party?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).</p> <p>As of the petition filing date, the claim is:</p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>
--	---

Case number (if known) \_\_\_\_\_

[illegible]

Fill in this information to identify the case:

Debtor \_\_\_\_\_  
 United States Bankruptcy Court for the: \_\_\_\_\_ District of \_\_\_\_\_  
 (State)  
 Case number \_\_\_\_\_  
 (If known)

☐ Check if this is an amended filing

Official Form 206E/F

**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

- ☐ No. Go to Part 2.  
☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount
<b>2.1</b>	<b>Priority creditor's name and mailing address</b> California Franchise Tax Board   <b>Date or dates debt was incurred</b> 03/2021; 03/2022  <b>Last 4 digits of account number</b>  <b>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ( )</b>	<b>As of the petition filing date, the claim is:</b> \$ 1650.00 <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> Annual Fee	\$ 1650.00
<b>2.2</b>	<b>Priority creditor's name and mailing address</b> Internal Revenue Service   <b>Date or dates debt was incurred</b>   <b>Last 4 digits of account number</b>  <b>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ( )</b>	<b>As of the petition filing date, the claim is:</b> \$ Unknown <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b>	\$ Unknown
<b>2.3</b>	<b>Priority creditor's name and mailing address</b> Sacramento County Tax Assessor   <b>Date or dates debt was incurred</b> 2021 - 2023  <b>Last 4 digits of account number</b>  <b>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ( )</b>	<b>As of the petition filing date, the claim is:</b> \$ Unknown <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> Local Taxes	\$ Unknown

Debtor GOOD GROUND INVESTMENTS LLC  
Name

Case number (if known) \_\_\_\_\_

**Part 1. Additional Page**

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2.4 Priority creditor's name and mailing address

\$ 779.98

\$ 779.98

Sacramento Department of Utilities

1395 35th Avenue

Sacramento, CA 95822

Date or dates debt was incurred

11/7/2023

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ( )

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Basis for the claim:

Is the claim subject to offset?

☐ No

☐ Yes

2. Priority creditor's name and mailing address

\$

\$

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ( )

Is the claim subject to offset?

☐ No

☐ Yes

2. Priority creditor's name and mailing address

\$

\$

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ( )

Is the claim subject to offset?

☐ No

☐ Yes

2. Priority creditor's name and mailing address

\$

\$

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ( )

Is the claim subject to offset?

☐ No

☐ Yes

Debtor GOOD GROUND INVESTMENTS LLC  
 Name \_\_\_\_\_

Case number (if known) \_\_\_\_\_

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	<b>Nonpriority creditor's name and mailing address</b> Corsair Heating and Air _____ _____ _____ Date or dates debt was incurred <u>01/13/2023</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> _____ <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.2	<b>Nonpriority creditor's name and mailing address</b> _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> _____ <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes
3.3	<b>Nonpriority creditor's name and mailing address</b> _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> _____ <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes
3.4	<b>Nonpriority creditor's name and mailing address</b> _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> _____ <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes
3.5	<b>Nonpriority creditor's name and mailing address</b> _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> _____ <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes
3.6	<b>Nonpriority creditor's name and mailing address</b> _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> _____ <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Name

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <u>    </u>	Nonpriority creditor's name and mailing address _____ _____ _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ _____   _____   _____
		Basis for the claim: _____	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	

3. <u>    </u>	Nonpriority creditor's name and mailing address _____ _____ _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ _____   _____   _____
		Basis for the claim: _____	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	

3. <u>    </u>	Nonpriority creditor's name and mailing address _____ _____ _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ _____   _____   _____
		Basis for the claim: _____	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	

3. <u>    </u>	Nonpriority creditor's name and mailing address _____ _____ _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ _____   _____   _____
		Basis for the claim: _____	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	

3. <u>    </u>	Nonpriority creditor's name and mailing address _____ _____ _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ _____   _____   _____
		Basis for the claim: _____	
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	

Name

**Part 3:**

**List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.2. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.3. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.4. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.5. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.6. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.7. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.8. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.9. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.10. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.11. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _



**Part 3: Additional Page for Others to Be Notified About Unsecured Claims**

Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _

Debtor \_\_\_\_\_  
Name \_\_\_\_\_

Case number (if known) \_\_\_\_\_

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5a.

Total of claim amounts

\$ 2429.80

5b. Total claims from Part 2

5b.

+

\$ 700.00

5c. Total of Parts 1 and 2

5c.

\$ 3129.80

Lines 5a + 5b = 5c.

**Fill in this information to identify the case:**

Debtor name \_\_\_\_\_

United States Bankruptcy Court for the: \_\_\_\_\_ District of \_\_\_\_\_  
(State)

Case number (if known): \_\_\_\_\_ Chapter \_\_\_\_\_

☐ Check if this is an amended filing

# Official Form 206G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

### 1. Does the debtor have any executory contracts or unexpired leases?

- ☒ No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.
- ☐ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

### 2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>_____</p> <p>_____</p> <p>_____</p>
2.2	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>_____</p> <p>_____</p> <p>_____</p>
2.3	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>_____</p> <p>_____</p> <p>_____</p>
2.4	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>_____</p> <p>_____</p> <p>_____</p>
2.5	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>_____</p> <p>_____</p> <p>_____</p>

Debtor NAME

Case number (if known) \_\_\_\_\_

**Additional Page if Debtor Has More Executory Contracts or Unexpired Leases**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of any government contract		
2.	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of any government contract		
2.	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of any government contract		
2.	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of any government contract		
2.	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of any government contract		
2.	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of any government contract		
2.	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of any government contract		

Fill in this information to identify the case:

Debtor name \_\_\_\_\_

United States Bankruptcy Court for the: \_\_\_\_\_ District of \_\_\_\_\_  
(State)

Case number (if known): \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 206H

**Schedule H: Codebtors**

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Does the debtor have any codebtors?

- ☒ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
- ☐ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, *Schedules D-G*. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name

Mailing address

Name

Check all schedules that apply:

2.1

Street

- ☐ D  
☐ E/F  
☐ G

City

State

ZIP Code

2.2

Street

- ☐ D  
☐ E/F  
☐ G

City

State

ZIP Code

2.3

Street

- ☐ D  
☐ E/F  
☐ G

City

State

ZIP Code

2.4

Street

- ☐ D  
☐ E/F  
☐ G

City

State

ZIP Code

2.5

Street

- ☐ D  
☐ E/F  
☐ G

City

State

ZIP Code

2.6

Street

- ☐ D  
☐ E/F  
☐ G

City

State

ZIP Code

Case number (if known) \_\_\_\_\_

## ZIP Code

Fill in this information to identify the case and this filing:

Debtor Name \_\_\_\_\_

United States Bankruptcy Court for the: \_\_\_\_\_ District of \_\_\_\_\_  
(State)

Case number (if known): \_\_\_\_\_

## Official Form 202

# Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

### Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets--Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule \_\_\_\_\_
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Executed on

3/12/2024  
MM / DD / YYYY

x

Osceola Stephenson  
Signature of individual signing on behalf of debtor

OSCEOLA STEPHENSON

Printed name

MANAGING MEMBER

Position or relationship to debtor

From the beginning of the fiscal year to filing date:	From	MM / DD / YYYY	to	MM / DD / YYYY		\$
For prior year:	From	MM / DD / YYYY	to	MM / DD / YYYY		\$
For the year before that:	From	MM / DD / YYYY	to	MM / DD / YYYY		\$

Description of sources of revenue

Gross revenue from each source (before deductions and exclusions)

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. Non-business income may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☐ None

From the beginning of the fiscal year to filing date:	From	MM / DD / YYYY	to	MM / DD / YYYY		\$
For prior year:	From	MM / DD / YYYY	to	MM / DD / YYYY		\$
For the year before that:	From	MM / DD / YYYY	to	MM / DD / YYYY		\$

Sources of revenue

Check all that apply

☐ Operating a business

☐ Other

Gross revenue (before deductions and exclusions)

1. Gross revenue from business

☐ None

Part 1: Income

Fill in this information to identify the case:

Debtor name \_\_\_\_\_

United States Bankruptcy Court for the: \_\_\_\_\_ District of \_\_\_\_\_ (State)

Case number (if known): \_\_\_\_\_

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/22

☐ Check if this is an amended filing



## Part 2: List Certain Transfers Made Before Filing for Bankruptcy

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ Other \_\_\_\_\_

---

page 3

Debtor \_\_\_\_\_ Case number (if known) \_\_\_\_\_

Name \_\_\_\_\_

## 8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

None

**Custodian's name and address**

### Description of the property

Value

Custodian's name

**Case title**

**Court name and address**

Street

Name \_\_\_\_\_

City	State	ZIP Code
------	-------	----------

Case number

**Street**

**Date of order or assignment**

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

#### Part 4: Certain Gifts and Charitable Contributions

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

None

**Recipient's name and address**

**Description of the gifts or contributions**

### Dates given

Value

9.1. Recipient's name

Street

City	State	ZIP Code
------	-------	----------

**Recipient's relationship to debtor**

9.2. Recipient's name \_\_\_\_\_

Street

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

**Recipient's relationship to debtor**

## Part 5: Certain Losses

**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**

☐ None

**Description of the property lost and how the loss occurred**

**Amount of payments received for the loss**

**Date of loss**Value of property  
lost

If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.

List unpaid claims on Official Form 106A/B (*Schedule A/B: Assets – Real and Personal Property*).

\$ \_\_\_\_\_

Debtor \_\_\_\_\_ Case number (if known) \_\_\_\_\_

## Part 6: Certain Payments or Transfers

## 11. Payments related to bankruptcy

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

None

**Who was paid or who received the transfer?**

**If not money, describe any property transferred**

### Dates

Total amount or value

11.1.

**Address**

Street

City	State	ZIP Code
------	-------	----------

Email or website address

**Who made the payment, if not debtor?**

**Who was paid or who received the transfer?**

**If not money, describe any property transferred**

## Dates

Total amount or value

11.2.

**Address**

Street

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Email or website address

**Who made the payment, if not debtor?**

## 12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

**Do not include transfers already listed on this statement.**

☐ None

Name of trust or device

**Describe any property transferred**

**Dates transfers  
were made**

Total amount or value

**Trustee**

Debtor \_\_\_\_\_ Name \_\_\_\_\_ Case number (if known) \_\_\_\_\_

**13. Transfers not already listed on this statement**

List any transfers of money or other property—by sale, trade, or any other means—made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☐ None

Who received transfer?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.1. _____	_____	_____	\$ _____
<b>Address</b>			
Street _____			
City _____ State _____ ZIP Code _____			
<b>Relationship to debtor</b>			
_____			

13.2. _____	_____	_____	\$ _____
<b>Address</b>			
Street _____			
City _____ State _____ ZIP Code _____			
<b>Relationship to debtor</b>			
_____			

**Part 7: Previous Locations**

**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☐ Does not apply

Address	Dates of occupancy
	From _____ To _____
14.1. _____	
Street _____	
City _____ State _____ ZIP Code _____	
14.2. _____	
Street _____	
City _____ State _____ ZIP Code _____	

## Part 8: Health Care Bankruptcies

☐ No. Go to Part 9.

☐ Yes. Fill in the information below.

**If debtor provides meals and housing, number of patients in debtor's care**

### How are records kept?

Check all that apply:

☐ Electronically  
☐ Paper

If debtor provides meals and housing, number of patients in debtor's care

### How are records kept?

Check all that apply:

☐ Electronically  
☐ Paper

☐ No

☐ Yes

☐ No  
☐ Yes

Debtor

Name

Case number (if known)

**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units****18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☐ None

	Financial institution name and address	Last 4 digits of account number	Type of account	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1.	Name _____ Street _____ City _____ State _____ ZIP Code _____	XXXX- _____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____
18.2.	Name _____ Street _____ City _____ State _____ ZIP Code _____	XXXX- _____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____

**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☐ None

Depository institution name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Name _____ Street _____ City _____ State _____ ZIP Code _____	_____ _____ Address _____ _____	_____ _____	<input type="checkbox"/> No <input type="checkbox"/> Yes

**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☐ None

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Name _____ Street _____ City _____ State _____ ZIP Code _____	_____ _____ Address _____ _____	_____ _____	<input type="checkbox"/> No <input type="checkbox"/> Yes

Debtor \_\_\_\_\_ Case number (if known) \_\_\_\_\_  
Name

**Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**

**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☐ None

Owner's name and address	Location of the property	Description of the property	Value
Name _____	_____	_____	\$ _____
Street _____	_____	_____	
City _____ State _____ ZIP Code _____			

**Part 12: Details About Environmental Information**

For the purpose of Part 12, the following definitions apply:

- ☒ *Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).
- ☒ *Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.
- ☒ *Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

**22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.**

☐ No

☐ Yes. Provide details below.

Case title	Court or agency name and address	Nature of the case	Status of case
Case number _____	Name _____	_____	<input type="checkbox"/> Pending
_____	Street _____	_____	<input type="checkbox"/> On appeal
	City _____ State _____ ZIP Code _____		<input type="checkbox"/> Concluded

**23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?**

☐ No

☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name _____	Name _____	_____	_____
Street _____	Street _____	_____	
City _____ State _____ ZIP Code _____	City _____ State _____ ZIP Code _____		



24. Has the debtor notified any governmental unit of any release of hazardous material?

Site name and address			Governmental unit name and address			Environmental law, if known	Date of notice
Name			Name				
Street			Street				
City	State	ZIP Code	City	State	ZIP Code		

**25. Other businesses in which the debtor has or has had an interest**

None

Business name and address		Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
25.1.	Name		EIN: _____
	Street		Dates business existed
			From _____ To _____
	City State ZIP Code		

25.2.	<b>Business name and address</b>  _____ Name _____ Street _____ _____ City State ZIP Code	<b>Describe the nature of the business</b>  _____ _____ _____	<b>Employer Identification number</b> Do not include Social Security number or ITIN.  EIN: _____ Dates business existed :  From _____ To _____
-------	---	---	--

Business name and address	Describe the nature of the business	Employer identification number Do not include Social Security number or ITIN.
25.3. _____ Name _____ _____ Street _____ _____ City _____ State _____ ZIP Code _____	_____ _____ _____	EIN: _____ - _____ Dates business existed _____ From _____ To _____

## 26. Books, records, and financial statements

☐ None

### Dates of service

From	To
------	----

**26a.1.**

Name \_\_\_\_\_

Street

City

State

ZIP Code

Name and address

### Dates of service

From	To
------	----

**26a.2.**

Name \_\_\_\_\_

Street

City

State

ZIP Code

☐ None

Name and address

### Dates of service

From \_\_\_\_\_ To \_\_\_\_\_

26b.1.

Name \_\_\_\_\_

Street

City

State

ZIP Code

**Name and address**

### Dates of service

From \_\_\_\_\_ To \_\_\_\_\_

**26b.2.**

Name \_\_\_\_\_

Street

City

State

ZIP Code

☐ None

Name and address

**If any books of account and records are unavailable, explain why**

26c.1.

Name \_\_\_\_\_

Street

City

State

ZIP Code



page 13

Debtor \_\_\_\_\_ Case number (if known) \_\_\_\_\_

## Name and address of recipient

30.2

Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

ZIP Code \_\_\_\_\_

Relationship to debtor \_\_\_\_\_

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

☐ No☐ Yes. Identify below.

Name of the parent corporation \_\_\_\_\_

Employer identification number of the parent corporation \_\_\_\_\_

EIN: \_\_\_\_\_

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

☐ No☐ Yes. Identify below.

Name of the pension fund \_\_\_\_\_

Employer identification number of the pension fund \_\_\_\_\_

EIN: \_\_\_\_\_

**Part 14: Signature and Declaration**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both.  
18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on

3/12/2024  
MM / DD / YYYY

x Osceda Stephenson  
Signature of individual signing on behalf of the debtor

Printed name

OSCEDA STEPHENSON

Position or relationship to debtor \_\_\_\_\_

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?☐ No☐ Yes